

Secretary of State **State of Missouri**Securities Division • 600 W. Main • PO Box 1276
Jefferson City, MO 65102

State Covered Investment Adviser Affidavit

I,	, do hereby swear a	nd affirm that I am a principal	of
representation on behalf of the applicant, after havi			ing
Designation of Qualifying Officer: The principal specified in MO 15 CSR 30-51.030(2)(D) and will	<u>*</u>	-	
Name	CRI	O or SS Number	
(Mark only one of the three boxes below)			
The applicant has never had any clients that re	eside in the State of Missouri	i.	
The applicant has maintained accounts for telephone numbers of all Missouri clients, as	•		and
The applicant has been registered as an inveand has been conducting business in Misson for federal registration on will not conduct advisory business in Misson	uri as a federal covered adv	iser. Applicant became ineligi within the last 90 days) a	ble and
	(Principal's Signature)		
Subscribed and sworn to before me this	day of	20	
	<u>(1)</u>	Jotary Public)	
My Commission expires:			